	I AII	ENT APPLIC	Effective D	EE DETER ecember 8,	RMINATION 2004	REC	ORD		•	cation or Do		
		CLAIM	S AS FILE	D - PART I	***************************************		SMALL	ENTITY		OT	HER THAN	
II S NATIONAL STATE				(Column 1)		TYPE		[MALL ENTITY	
U.S. NATIONAL STAGE FEES BASIC FEE			3				. RATE	FI	EE	RAT	FEI FEI	
							BASIC FEE	15	3	OR BASIC FE	E	
EXAMINATION FEE							EXAM. FEE	10	U	· EXAM. FE	E	
SEARCH FEE			·				SEARCH FE			SEARCH		
FEE FOR EXTRA SPEC. PGS.			n	ninus 100 =	/ 50 =	7 1	X \$ 125			X \$ 25		
TOTAL CHARGEABLE CLAIMS			7	minus 20 = .	·	7 1	X \$ 25 =					
NDEPENDENT CLAIMS			12	minus 3 = *		-	X \$ 100	<u> </u>				
JUL 1	TIPLE DEPE	NDENT CLAIM P	RESENT			1	+ \$ 180 =					
If	he differend	ce in column 1 is	s less than ze	ero, enter "0" in	column 2	_ [_	TOTAL	ile		R +\$360 R TOTAL		
MENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSL PAID FOR	PRESENT Y EXTRA		RATE.	ADDI- TIONA FEE		RATE	ADDI- TIONAL FEE	
AIMENDIMENT	olal	*	Minus	**	=		X \$ 25 =		OF	X \$ 50 =		
	ndependerit	*	Minus	***	=	. ,	(\$100 =	-	OR			
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIR				M· D	. +	\$ 180 =	-	OR		-	
						TO	TAL ADDIT.	-	OR	TOTAL ADDIT	1 1	
		(Column 1)	•	. : (Column 2)	(Column 3)				· .	FFF		
		CLAIMS REMAINING AFTER AMENDMENT	·	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL	
To	otal	*	Minus	**	=	X	\$ 25 =		oR	X \$ 50 =	FEE	
Ind	dependent	•	Minus	***	=	 	\$ 100 =		OR			
F	IRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						180 =	·	OR	X \$ 200 =		
	•						AL ADDIT.		L	+ .\$ 360 = TOTAL ADDIT.		
							FFF		טת	FFF		

If the entry in column 1 is less than the entry in column 2, write "0" in column 3.

If the "Highest Number Previously Paid For" IN THIS SPACE is less than '20', enter "20".

If the "Highest Number Previously Paid For" IN THIS SPACE is less than '3', enter "3".

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate boy in column to